PPOSSAN DE 03Approved for use procept 7/31/2004 (Pub 68) de 04
U.S. Pater Line: Tracement Object U.S. DEPURTUENT OF COUNTERCE
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Substitute for Form PTO-\$75  CLAIMS AS FILED - PART I (Course :) (Course 2)						SMALL E	NTITY	OR	OTHER SMALL		
ARTXE REGAUN CELIT REGAUN ROR				REXTRA	RATE	FEE		RATE	FEE	1	
EASI(		NO.EE					s·	OR		\$	
TOTA	L CLAMS FR :. 16(c))		minus 20 =			x \$=		OR	x \$=		:
	PENDENT CLAMS FR 1.16(D))		minus 3			x s=		OR	x.5 =		
AIUL I	IPLE DEPENDENT	CLAINI PRESEN	r 137	CFR 1.16(d))		+ 5=		OR	+5=		
" If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL		
	CLAI	IMS AS AME	NDED -	PART II		:		٠.		•:	
11	1-1- 11	(Calumn 1)		(Column 2) (Column 3)		SMALL ENTITY		OR	OTHER SMALL	R THAN ENTITY	
4		CLASAS . REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	-
AMENDMENT	Total (CCCF3 1, S(d))	32	Mous	32		x s, *		OR-	X \$=		
S	Independent solds on Hear	1	Minus	3	•	x s,		9O	-x \$=		
A	FIRST PRESENTATI	ON OF SHILTIPLE	DEPENDER	T CLARA 137 CF	R 1,16(d))	+ 5 =		OR	:+5=		
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N F B		REMAINING AFTER MENDMENT		NUMBER PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE		<u>-</u>	FEE'	
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N.	trdesendant LC CES 115@fi		- เปเกษร	3	./_	x 5=		OR:	x s=		<u>.</u>
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR. (EGG))					+5		OR:	TOTAL -	F. F. 1	11 8 4 3 1 2 1 2 1
						TOTAL ADD'L FEE		OR	ADD'L FEE		
		(Column 1)		(Column 2)	(Celumn 3)			, ;		<del>, :</del>	-l
2 17		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
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	For Child Lightle Control Child Child Lightle Child Lightl		Samus		=	). <u>\$</u> =		OR	-x:5		1
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAME (3) CFR : 15(0))					+ \$		OR	.+ <u>}</u> .=		
<del>                                     </del>						TOTAL ADDL FEE		OR	ADD'L FEE		
	thine entry in cold	and a Conserved	Dad Em	IN THIS SPACE	: 15 N233 liver 4:	n 3. ), ender "20".		- ,			*** *** ** * ****
١.	the "Highest Number The "Highest Number The "Highest Number Number 1 Number	mber Previously	y Paid For Paid For (	IN THIS SPACE	is less tran 3, dent) is the high	enter '3'. Nast number found (	n ine appropr	ale box in	column 1.		٠ ل

The Highest Number Previously Paid For (Total or Independent) is the righest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file fand by the USPTO to process) an application. Confedentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including patheting, preparing, and submitting the completed application form to the USPTO. Indicate with vary concerning upon the individual case. Any comments on the amount of time you require to complete this form ancfor suggestions for reducing this burdent, should be sent to the Cruel Information Officer. U.S. Patent and Tracemark Office. U.S. Department of Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.